

Case 1:03-cv-00016 Document 117 Filed 01/13/2006 Page 1 of 1  
U.S. Department of Justice  
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF	Michael W. Kennedy dba MKI Airconditioning and Refrigeration	COURT CASE NUMBER	CV-03-0016
DEFENDANT	Rosalina T. Gabutin	TYPE OF PROCESS	

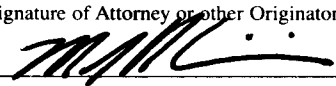
<b>SERVE</b> ➔ <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
	Rosalina T. Gabutin ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) c/o Guam Detention Facility, Department of Corrections, Guam <del>Federal Prison, Guam, U.S.A.</del>

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be served with this Form - 285	7
Mark K. Williams, Esq. Smith & Williams PO Box 5133 CHRB Saipan MP96950 Tel 670-233-3334	Number of parties to be served in this case	1
	Check for service on U.S.A.	


SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Clerk Addresses, All Telephone Numbers, and Estimated Times Available For Service):  
District Court

JAN 13 2006

For The Northern Mariana Islands  
By \_\_\_\_\_  
(Deputy Clerk)

Signature of Attorney or other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 670-233-3334	DATE
---	---	----------------------------------	------

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

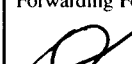

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 7	District of Origin No. 05	District to Serve No. 93	Signature of Authorized USMS Deputy or Clerk 	Date 8/9/04
---	--------------------	------------------------------	-----------------------------	--	----------------

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
--	---

Address (complete only if different than shown above)	Date of Service 8/11/04	Time 1:00 pm
---	----------------------------	-----------------

Service Fee \$45.00	Total Mileage Charges (including endeavors) \$4.50	Forwarding Fee 	Total Charges <del>\$44.50</del>	Advance Deposits \$315.00	Amount owed to U.S. Marshal or \$4.50	Amount of Refund 
------------------------	---	---	-------------------------------------	------------------------------	--	---

REMARKS:

1 DUSM, 12 miles x .375 = \$4.50  
service fee \$45.00 x 7 = \$315.00  
TOTAL = \$319.50

PRIOR EDITIONS  
MAY BE USED

1. CLERK OF THE COURT

FORM USM-285 (Rev. 12/15/80)